

# Beyond COVID-19: Supporting the well-being of **ethnic minority** NHS staff



## Fact sheet

This factsheet offers guidance to NHS management on supporting ethnic minorities following the COVID-19 pandemic.

Ethnic minorities make up around 20% of NHS staff and are often overrepresented in frontline roles, playing a vital role in providing essential healthcare. However, they have been disproportionately affected by COVID-19, experiencing higher death rates and increased anxiety. By April 2020, around 63% of healthcare staff who died due to COVID-19 were of minority ethnic backgrounds.

Following the pandemic, there continues to be concerns around mental health and well-being. Recognising the importance of supporting their well-being and success is essential for their individual growth and satisfaction as well as for the overall resilience and effectiveness of the NHS.

By implementing the evidence-based recommendations outlined below, managers can create a more inclusive and equitable work environment that supports the well-being, professional development, and retention of ethnic minority employees, contributing to the resilience of the NHS.

## Key recommendations

- **Cultural Intelligence**  
Provide training for line managers in cultural intelligence to improve their awareness of cultural differences so that they can lead with compassion and empathy.
- **Communications**  
Improve access to information by organising career development workshops and events while also raising awareness of available support.
- **Leadership**  
Increase representation of ethnic minority staff in leadership positions through supporting professional development and promoting successful role models.
- **Support**  
Establish dedicated ambassadors to support ethnic minority staff during entry, induction and transitions, as well as disciplinary actions and grievances.
- **Human Resources**  
Introduce tailored training, increase involvement in decision making through effective employee engagement, ensure fair compensation and work-life balance, and use surveys to inform further interventions.
- **Mentoring**  
Introduce career development mentoring to support ethnic minority employees, including non-clinical staff and those from all pay bands.
- **Support Networks**  
Enhance staff participation by increasing awareness of existing ethnic minority support networks and allowing dedicated time for involvement in network activities.

## About the research

Researchers from Leeds University Business School engaged with ethnic minority employees to gather information about their experiences working at different levels of the NHS.

As part of their research, funded by the UK Research and Innovation (UKRI), they surveyed 524 employees working at five NHS trusts, conducted 60 interviews and held four tailored workshops for managers to embrace inclusive leadership and human resource management practices.

## Findings

- When surveyed, the majority of ethnic minority workers gave the level of care and support received from their organisations a rating of 4 out of 7. Staff also rated their own wellbeing at 4 out of 7. These results suggest that there is a significant room for improvement in organisational support and a need for additional policies to support well-being.
- Many employees reported that workplace culture discourages them from raising or discussing issues of racial inequalities or racial bias.
- Line managers were perceived as uncomfortable or unwilling to engage in dialogue or proactive actions around issues related to race and ethnicity.
- Few employees felt comfortable reporting experiences they consider racist (including harassment from patients or colleagues) to a line manager, fearing a lack of follow-up.
- Many employees were unaware of the role of HR practices, including employment rights (such as carer's leave and phased return to work after illness).
- Barriers to progression include a lack of opportunities to progress, demotions or restructuring impacting roles and salary and a lack of mentoring.
- Employees perceived the appraisal and recruitment processes as unfair, including poor experiences with recruitment panels due to cultural differences.
- Employees experienced barriers in seeking help or advice, with limited visibility of staff support networks.
- Line managers or colleagues sometimes saw active participation in support networks unfavourably.
- Staff reported unequal access to information on IT systems / intranet, with non-desk-based staff missing out on training opportunities and support.

## Conclusions

### A more inclusive, equitable and resilient NHS

By following these recommendations, the NHS could adopt human resources policy and practice which embeds the welfare of ethnic minority staff at the forefront of its workforce agenda.

The cultural intelligence training for managers would improve the experience of ethnic minority workers by encouraging greater compassion and more concern for employee well-being.

The additional support for staff – including reciprocal mentoring – would improve job satisfaction, ensuring the retention of workers, something which is essential as NHS reliance on ethnic minority staff is projected to increase in the coming years.

An NHS where ethnic minority workers receive additional practical and mental health support, alongside improved career progression, would be more inclusive, equitable and resilient.

### Questions?

Principal Investigator,  
Professor Lynda Song:  
[L.Song@leeds.ac.uk](mailto:L.Song@leeds.ac.uk)



### Co-investigators

Mostafa, A., Irnazarow, A.M., Charlwood, A., Morris, L-D., Jones-Nielsen, J.

### Funders

- Leeds University Business School Impact and Engagement Support Fund (IESF)
- Research England Participatory Research Fund
- UKRI / ESRC Ideas to address COVID-19 grant [ES/W001780/1]
- Research England QR Strategic Priorities Fund

**Project website** [bit.ly/3uHQzNH](https://bit.ly/3uHQzNH)